

Amendment ☐
Plan Revision ☐
Plan Reject Submittal ☐

MUST BE ACCOMPANIED BY 3 SETS OF PLANS

Application must be submitted in person
Faxed or mailed amendment applications will not be processed

Permit Number: _____
Tax Map #: _____ Grid _____ Parcel _____
Environmental Health: Sent ____/____/____
Fee Paid \$ _____

Changes to permit are as follows:

- 1) _____

2) _____

3) _____

Signature: _____

Date: _____ Daytime phone # _____

Amendment taken by: _____
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Building Inspector _____ Date _____

Environmental Health _____ Date _____

Planning Office _____ Date _____